Case 16-08421 Doc 1 Filed 03/11/16 Entered 03/11/16 11:00:40 Desc Main Document Page 1 of 72

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself			
		About Debtor 1:	F	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Deborah First name L. Middle name Hill Last name and Suffix (Sr., Jr., II, III)	N	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have			
	used in the last 8 years Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1426		

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Case number (if known)

Debtor 1 Deborah L. Hill

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and	■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)
	doing business as names	EINs	EINs
5.	Where you live	3473 S. King Drive #453	If Debtor 2 lives at a different address:
		Chicago, IL 60616 Number, Street, City, State & ZIP Code Cook County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Desc Main

Case number (if known) Debtor 1 Deborah L. Hill

Part	Tell the Court About	our B	Bankruptcy Cas	se					
7.	The chapter of the Bankruptcy Code you are			rief description of each, see go to the top of page 1 and			S.C. § 342(b) for Individu	uals Filing for Bankruptcy	
	choosing to file under	☐ Chapter 7							
		☐ Chapter 11							
		□с	hapter 12						
		■ C	chapter 13						
8.	How you will pay the fee	•	about how you	u may pay. Typically, if you a attorney is submitting your p	are paying	the fee yourself,	you may pay with cash	r local court for more details a, cashier's check, or money a credit card or check with	
			I need to pay	the fee in installments. If the in Installments (Official For		e this option, sigr	n and attach the Applica	ation for Individuals to Pay	
			I request that but is not requ applies to you	t my fee be waived (You ma	ay request may do so able to pay	only if your inco the fee in instal	ome is less than 150% of lments). If you choose	of the official poverty line that this option, you must fill out	
9.	Have you filed for bankruptcy within the last 8 years?	□ No							
	·		District	Northern District of Illinois, Eastern Division	When	4/15/14	Case number	14B 13986-Chapter 13	
			District	Northern District of Illinois, Eastern Division	When	7/03/13	Case number	13B 27176-Chapter 13	
			District	Northern District of Illinois Eastern Division	When	11/25/08	Case number	08B 32363-Chapter 13	
10.	Are any bankruptcy	■ No	n						
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye							
			Debtor				Relationship to y		
			District		When		Case number, if		
			Debtor		When		Relationship to y		
			District		vvnen		Case number, if	known	
11.	Do you rent your residence?	■ No	o. Go to lii	ne 12.					
	residence :	□Y€	es. Has you	ur landlord obtained an evict	tion judgme	ent against you a	and do you want to stay	in your residence?	
				No. Go to line 12.					
				Yes. Fill out <i>Initial Statemer</i> bankruptcy petition.	nt About ar	n Eviction Judgm	ent Against You (Form	101A) and file it with this	

Debtor 1	Deborah L. Hill	Document	Page 4 of 72 Case number (if known)	
Part 3:	Report About Any Businesses You Own as a	Sole Proprietor		

Par	Report About Any Bu	sinesses	You Own as a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of bus	iness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	
	If you have more than one sole proprietorship, use a		Number, Street, City, Sta	te & ZIP Code
	separate sheet and attach it to this petition.		Check the appropriate bo	x to describe your business:
			☐ Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Rea	Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (as d	efined in 11 U.S.C. § 101(53A))
			☐ Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
			☐ None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	s. If you indicate that you are	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am not filing under Chap	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	Hazardous Property or An	y Property That Needs Immediate Attention
14.	Do you own or have any	■ No.		
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is the hazard?	
	identifiable hazard to public health or safety? Or do you own any property that needs		If immediate attention is	
	immediate attention?		needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	New loss Charact City Otata 9 7 in Code
				Number, Street, City, State & Zip Code

Debtor 1 Deborah L. Hill

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Deborah L. Hill			Case numb	DET (if known)
Par	6: Answer These Quest	ions for Rep	orting Purposes		
16.	What kind of debts do you have?			sumer debts? Consumer debts are denal, family, or household purpose."	fined in 11 U.S.C. § 101(8) as "incurred by an
		[☐ No. Go to line 16b.		
		ı	Yes. Go to line 17.		
				iness debts? Business debts are debts ment or through the operation of the bu	
		[☐ No. Go to line 16c.		
		[Yes. Go to line 17.		
		16c. S	tate the type of debts you owe	e that are not consumer debts or busine	ess debts
17.	Are you filing under Chapter 7?	■ No.	am not filing under Chapter 7.	. Go to line 18.	
	Do you estimate that after any exempt property is excluded and			you estimate that after any exempt pro lable to distribute to unsecured creditors	perty is excluded and administrative expenses s?
	administrative expenses	[□No		
	are paid that funds will be available for	[☐ Yes		
	distribution to unsecured creditors?				
18.	How many Creditors do	□ 1-49		□ 1,000-5,000	☐ 25,001-50,000
	you estimate that you owe?	50-99		□ 5001-10,000	5 0,001-100,000
		☐ 100-199 ☐ 200-999		□ 10,001-25,000	☐ More than100,000
19.	How much do you	\$0 - \$50	.000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	estimate your assets to be worth?		- \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion
			1 - \$500,000	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion
		□ \$500,00	1 - \$1 million	— \$100,000,001 - \$300 Hillion	La More train \$50 billion
20.	How much do you	□ \$0 - \$50	,000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your liabilities to be?		- \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion
		□ \$100,001 - \$500,000 □ \$500,001 - \$1 million		☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion
		\$500,00	1 - \$1 million	— \$100,000,001 \$000 Hillion	— Were than too Simon
Par	7: Sign Below				
For	you	I have exar	nined this petition, and I decla	re under penalty of perjury that the info	rmation provided is true and correct.
				am aware that I may proceed, if eligible ef available under each chapter, and I o	e, under Chapter 7, 11,12, or 13 of title 11, choose to proceed under Chapter 7.
				t pay or agree to pay someone who is notice required by 11 U.S.C. § 342(b).	not an attorney to help me fill out this
		I request re	lief in accordance with the cha	apter of title 11, United States Code, sp	ecified in this petition.
			case can result in fines up to		or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Deborah Signature o	L. Hill	Signature of Debt	or 2
		Executed of	m March 11, 2016	Executed on	
			MM / DD / YYYY	MI	M / DD / YYYY

Debtor 1 Deborah L. Hill Deborah L. Hill

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Rae Kaplan	Date	March 11, 2016
Signature of Attorney for Debtor		MM / DD / YYYY
Rae Kaplan		
Printed name		
Kaplan Bankruptcy Firm, LLC		
Firm name		
25 East Washington St		
Suite 1501		
Chicago, IL 60602		
Number, Street, City, State & ZIP Code		
Contact phone (312) 294-8989	Email address	rkaplan@financialrelief.com
Bar number & State		

		1200:11111	<u>-111 Page 8 01 7 / </u>		
Fill in this infor	mation to identify your	case:			
Debtor 1	Deborah L. Hill				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number				_	
(if known)					Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
		Your as	ssets If what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	4,625.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	4,625.00
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	91,742.45
	Your total liabilities	\$	91,742.45
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,733.33
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,538.33
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
7.	■ Yes What kind of debt do you have?		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

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Debtor 1 Deborah L. Hill Document Page 9 of 72
Case number (if known)

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form		4 700 00
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	\$	1,733.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
From Fart 4 on Schedule E/F, copy the following.		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	16,957.36
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	16,957.36

		Document	Page 10 of 72		
Fill in this	information to identify your c	ase and this filing:			
Debtor 1	Deborah L. Hill				
Dobto: 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing	g) First Name	Middle Name	Last Name		
United Stat	es Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLI	NOIS		
Case numb	er		_	[☐ Check if this is an
					amended filing
Official	Form 106A/B				
Sched	dule A/B: Prope	erty			12/15
		items. List an asset only once. If			
		e as possible. If two married peopl separate sheet to this form. On th			
Answer every	y question.	·		•	, ,
Part 1: Des	scribe Each Residence, Building,	Land, or Other Real Estate You Ov	wn or Have an Interest In		
	g,				
1. Do you ov	vn or have any legal or equitable	interest in any residence, building	, land, or similar property?		
■ No. Go	to Dort 2				
_					
☐ Yes. W	/here is the property?				
Part 2: Des	scribe Your Vehicles				
		table interest in any vehicles,			nicles you own that
someone els	se drives. If you lease a vehicle	, also report it on <i>Schedule G: E</i>	xecutory Contracts and Ur	nexpired Leases.	
3. Cars. va	ns, trucks, tractors, sport util	ity vehicles, motorcycles			
o. ca.c, ra.	, и ото, и ото о, орот и и	,			
☐ No					
Yes					
3.1 Make	: Land Rover	Who has an interest in th	e property? Check one	Do not deduct secured clai	
Mode	Discovery	Debtor 1 only		the amount of any secured Creditors Who Have Claim	
Year	···	Debtor 2 only			
	oximate mileage: 89.0		only	Current value of the entire property?	Current value of the portion you own?
Othe	r information:	☐ At least one of the debt	,		
puro	chased February 10, 2016				
	52,500.00	☐ Check if this is comm	unity property	\$2,500.00	\$2,500.00
		(see instructions)			
4 Watercra	aft aircraft motor homes AT	Vs and other recreational vehi	cles other vehicles and	accessories	
		nal watercraft, fishing vessels, sr	-		
		_			
No					
☐ Yes					
5 Add the	dollar value of the portion vo	ou own for all of your entries f	rom Part 2. including any	entries for	
		Vrite that number here			\$2,500.00
Part 3: Des	scribe Your Personal and Housel	nold Items			
Do you ow	n or have any legal or equital	ole interest in any of the follow	ving items?		urrent value of the
					ortion you own?
					o not deduct secured aims or exemptions.
6. Househo	old goods and furnishings			Clo	anno or exemplions.
	es: Major appliances, furniture, l	inens, china, kitchenware			

□ No
Official Form 106A/B Schedule A/B: Property page 1

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Debtor 1	Deborah L. Hill		Document	Page 11 of 72 Case number	(if known)	
Yes.	Describe					
	misce applia		ousehold furniture, f	urnishings, goods &]	\$400.00
·						
7. Electron Example ■ No				pment; computers, printers, scanners	s; music co	ollections; electronic devices
	Describe					
Example _	bles of value es: Antiques and figurines other collections, mem			oks, pictures, or other art objects; sta	amp, coin,	or baseball card collections;
■ No □ Yes.	Describe					
	ent for sports and hobbi es: Sports, photographic, of musical instruments		other hobby equipment;	bicycles, pool tables, golf clubs, skis	; canoes a	and kayaks; carpentry tools;
	Describe					
■ No	ns bles: Pistols, rifles, shotgur Describe	ns, ammunitio	n, and related equipmer	it		
11. Clothes						
□ No	oles: Everyday clothes, fur	s, leather coa	ts, designer wear, shoes	s, accessories		
Yes.	Describe					
	neces	sary wearin	ig apparel]	\$500.00
■ No	•	stume jewelry,	, engagement rings, wed	lding rings, heirloom jewelry, watches	s, gems, g	old, silver
13. Non-fa						
Examp ■ No	oles: Dogs, cats, birds, hor	ses				
	Describe					
■ No	her personal and housel Give specific information.	-	ou did not already list, i	ncluding any health aids you did r	not list	
	one specific intermediation				1	
	he dollar value of all of y art 3. Write that number h			ny entries for pages you have atta	ıched	\$900.00
	scribe Your Financial Asset					
Do you ow	≀n or have any legal or e	quitable inter	rest in any of the follov	ving?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash Examp	oles: Money you have in yo	our wallet, in y	our home, in a safe dep	osit box, and on hand when you file y	your petitic	on

No

Schedule A/B: Property Official Form 106A/B page 2

			21 Doc 1	Filed 03/11/16 Document	Entered 03/11/16 11:00:40 Page 12 of 72 Case number (if known)	Desc Main
De	ebtor 1	Deborah L. Hill			Case number (if known)	
	☐ Yes					
				al accounts; certificates of counts with the same ins	of deposit; shares in credit unions, brokerage litution, list each.	houses, and other similar
				Institution r	name:	
		17	7.1.	debit care	d with American Express Blue	\$600.00
18.	Bonds,	mutual funds, or pu bles: Bond funds, inve	ublicly traded sto stment accounts w	cks vith brokerage firms, mor	ney market accounts	
	■ No		Institution or i	ecuer name:		
	⊔ Yes		institution or i	ssuer name.		
	joint v	enture			orporated businesses, including an interes	st in an LLC, partnership, and
	☐ Yes.	Give specific informa	tion about them Name of entity:		% of ownership:	
	Negotia Non-ne ■ No	<i>able instrument</i> s inclu	de personal check are those you can	r negotiable and non-nows, cashiers' checks, pro- not transfer to someone	egotiable instruments missory notes, and money orders. by signing or delivering them.	
21.		nent or pension acco bles: Interests in IRA, I		1(k), 403(b), thrift saving	s accounts, or other pension or profit-sharing	plans
	☐ Yes.	List each account sep Ty	earately. ype of account:	Institution r	name:	
	Your sl Examp ☐ No		oosits you have ma	I rent, public utilities (elec	tinue service or use from a company ctric, gas, water), telecommunications compar	nies, or others
				security (deposit with landlord	\$625.00
				<u> </u>	aopolic Williamarora	
	Annuiti ■ No □ Yes		eriodic payment o	• •	r life or for a number of years)	
			•			
24.		s in an education IR C. §§ 530(b)(1), 529A			ogram, or under a qualified state tuition pro	ogram.
	☐ Yes	Instituti	ion name and des	cription. Separately file th	ne records of any interests.11 U.S.C. § 521(c)	:
25.	Trusts, ■ No	equitable or future i	interests in prope	erty (other than anythin	g listed in line 1), and rights or powers exe	ercisable for your benefit
	_	Give specific informa	tion about them			
26.				ets, and other intellectuoroceeds from royalties a	al property and licensing agreements	

 $\hfill \square$ Yes. Give specific information about them...

		Case 16	-08421	Doc 1		Entered 03/11/16 11:00:40	Desc Main
De	ebtor 1	Deborah L	. Hill		Document	Page 13 of 72 Case number (if known)	
27.	Examp ■ No	es, franchises bles: Building po Give specific i	ermits, exclus	sive licenses		n holdings, liquor licenses, professional license	es
М	onev or r	property owed	to vou?				Current value of the
	ooy	proporty office	. 10) 0				portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed to	you				
	☐ Yes. (Give specific ir	nformation ab	oout them, inc	cluding whether you alre	ady filed the returns and the tax years	
29.	■ No	• •	·	,	usal support, child suppo	ort, maintenance, divorce settlement, property	settlement
	□ 165. V	Give specific ii	iioiiiialioii	••			
30.	Examp		ages, disabilit	ty insurance p	payments, disability ben someone else	efits, sick pay, vacation pay, workers' comper	nsation, Social Security
	■ No	Give specific i	nformation				
	— 103.	Oive specific i	monnation				
31.		ts in insuranc bles: Health, dis		e insurance; h	nealth savings account (HSA); credit, homeowner's, or renter's insurar	nce
	☐ Yes. I	Name the insu		ny of each po pany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
32.	If you a				someone who has die t proceeds from a life in	ed surance policy, or are currently entitled to rece	sive property because
	_	Give specific i	nformation				
		'					
33.					you have filed a lawsu surance claims, or rights	it or made a demand for payment sto sue	
	☐ Yes.	Describe each	claim				
34.	Other c	contingent and	d unliquidate	ed claims of	every nature, includin	g counterclaims of the debtor and rights to	set off claims
		Describe each	claim				
35.	Any fin	ancial assets	you did not	already list			
		Give specific i	nformation				
36					om Part 4, including a	ny entries for pages you have attached	\$1,225.00
Pa	art 5: Des	scribe Any Busi	ness-Related	Property You	Own or Have an Interest	In. List any real estate in Part 1.	
37.	Do you o	own or have any	legal or equi	table interest	in any business-related p	roperty?	
	■ No. Go	-	- •				
	☐ Yes. G	So to line 38.					

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Case number (if known) Document Debtor 1 Deborah L. Hill Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$2,500.00 57. Part 3: Total personal and household items, line 15 \$900.00 Part 4: Total financial assets, line 36 \$1,225.00 58. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 60. Part 7: Total other property not listed, line 54 \$0.00 61.

\$4,625.00

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 5

Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$4,625.00

\$4,625.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Deborah L. Hill			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Check only one box for each exemption. Schedule A/B				
2001 Land Rover Discovery 89,000 miles	\$2,500.00		\$2,400.00	735 ILCS 5/12-1001(c)	
purchased February 10, 2016 for \$2,500.00 Line from <i>Schedule A/B</i> : 3.1			100% of fair market value, up to any applicable statutory limit		
2001 Land Rover Discovery 89,000 miles	\$2,500.00		\$100.00	735 ILCS 5/12-1001(b)	
purchased February 10, 2016 for \$2,500.00 Line from <i>Schedule A/B</i> : 3.1			100% of fair market value, up to any applicable statutory limit		
miscellaneous household furniture, furnishings, goods & appliances	\$400.00		\$400.00	735 ILCS 5/12-1001(b)	
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		
necessary wearing apparel Line from Schedule A/B: 11.1	\$500.00		\$500.00	735 ILCS 5/12-1001(a)	
Line from Goreadic A.E. TTT			100% of fair market value, up to any applicable statutory limit		
debit card with American Express	\$600.00		\$600.00	735 ILCS 5/12-1001(b)	
Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit		

Case 16-08421 Doc 1 Filed 03/11/16 Entered 03/11/16 11:00:40 Desc Main Document Page 16 of 72 Case number (if known) Deborah L. Hill Debtor 1 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B security deposit with landlord 735 ILCS 5/12-1001(b) \$625.00 \$625.00 Line from Schedule A/B: 22.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Yes

Fill in this information to identify your case:						
Debtor 1	Deborah L. Hill					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS			
Case number						
(if known)					Check if this is an	
					amended filing	

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

		Document	Page 18 of 72	
Fill in this info	ormation to identify your	case:		
Debtor 1	Deborah L. Hill			
	First Name	Middle Name	Last Name	_
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	_
(Opodae II, IIIIIg)	i iist ivaine			
United States E	Bankruptcy Court for the:	NORTHERN DISTRICT OF IL	LINOIS	_
Case number (if known)				☐ Check if this is an amended filing
	rm 106E/F E/F: Creditors W	/ho Have Unsecured	Claims	12/15
any executory co Schedule G: Exe Schedule D: Cre left. Attach the C name and case n	ontracts or unexpired leases cutory Contracts and Unexp ditors Who Have Claims Sec	that could result in a claim. Also lired Leases (Official Form 106G). If ured by Property. If more space is le. If you have no information to re	list executory contracts on Schedule Do not include any creditors with par needed, copy the Part you need, fill	h NONPRIORITY claims. List the other party to A/B: Property (Official Form 106A/B) and on tially secured claims that are listed in it out, number the entries in the boxes on the n the top of any additional pages, write your
	litors have priority unsecure			
■ No. Go to				
☐ Yes.				
	All of Your NONPRIORIT	Y Unsecured Claims		
☐ No. You ☐ Yes. 4. List all of younsecured c	our nonpriority unsecured claim, list the creditor separately	art. Submit this form to the court with aims in the alphabetical order of the foreach claim. For each claim listed	he creditor who holds each claim. If a d, identify what type of claim it is. Do no	t list claims already included in Part 1. If more
than one cre Part 2.	ditor holds a particular claim, li	ist the other creditors in Part 3.If you	have more than three nonpriority unsec	eured claims fill out the Continuation Page of
				Total claim
4.1 Amer	ica's Financial Choice	Last 4 digits of acc	count number	\$440.00
1415 Towe	wity Creditor's Name W. 22nd St r Floor	When was the deb	t incurred?	
Number	Brook, IL 60523 r Street City State Zlp Code curred the debt? Check one.	As of the date you	file, the claim is: Check all that apply	
Deb	tor 1 only	☐ Contingent		
☐ Deb	tor 2 only	☐ Unliquidated		
☐ Deb	tor 1 and Debtor 2 only	☐ Disputed		
☐ At le	east one of the debtors and and	Julio1	RITY unsecured claim:	
debt	ck if this claim is for a comi		ng out of a separation agreement or div	orce that you did not
■ No	iaim aubject to onaetr		n or profit-sharing plans, and other simil	ar debts
■ No		Other, Specify	. S. p. Sin Graning Plants, and other Sinin	u. u.u.u
∟ res		Other Specify		

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Case number (# know)

Debtor 1 Deborah L. Hill 4.2 \$7,753.44 Americredit Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 183853 When was the debt incurred? Arlington, TX 76096 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Car Deficiency ☐ Yes 4.3 Aspire Card/Midland Credit Mgmt. Last 4 digits of account number \$642.29 Nonpriority Creditor's Name When was the debt incurred? c/o Jefferson Capital Systems P.O. Box 7999 Saint Cloud, MN 56302-9617 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.4 Aspire Card/Midland Credit Mgmt. Last 4 digits of account number \$558.68 Nonpriority Creditor's Name c/o Jefferson Capital Systems When was the debt incurred? P.O. Box 7999 Saint Cloud, MN 56302-9617 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit card purchases ☐ Yes

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Case number (if know)

Debtor	1 Deborah L. Hill	Case number (if know)	
4.5	Aspire Card/Midland Credit Mgmt. Nonpriority Creditor's Name	Last 4 digits of account number	\$883.47
	c/o Jefferson Capital Systems P.O. Box 7999 Saint Cloud, MN 56302-9617	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit card purchases	
4.6	Aspire Card/Midland Credit Mgmt. Nonpriority Creditor's Name	Last 4 digits of account number	\$388.63
	c/o Jefferson Capital Systems P.O. Box 7999	When was the debt incurred?	
	Saint Cloud, MN 56302-9617		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_	Пан	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	
4.7	Aspire Card/Midland Credit Mgmt.	Last 4 digits of account number	\$1,224.10
	Nonpriority Creditor's Name c/o Jefferson Capital Systems P.O. Box 7999	When was the debt incurred?	
	Saint Cloud, MN 56302-9617		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	

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Debtor 1 Deborah L. Hill 4.8 \$538.35 AT&T Broadband Last 4 digits of account number Nonpriority Creditor's Name c/o Credit Protection Assoc. When was the debt incurred? P.O. Box 802068 Dallas, TX 75380 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes 4.9 Ballv's Last 4 digits of account number \$1,555.00 Nonpriority Creditor's Name When was the debt incurred? c/o Professional Recovery System 600 17th St. **Denver, CO 80202** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify **Bank of America** \$1,306,00 Last 4 digits of account number Nonpriority Creditor's Name c/o FBCS When was the debt incurred? 2200 Byberry Rd., Ste. 120 Hatboro, PA 19040 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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Case number (if know)

Debtor 1 Deborah L. Hill 4.1 **Central Furniture Mart** \$2,270.72 Last 4 digits of account number Nonpriority Creditor's Name 1348 N. Milwaukee When was the debt incurred? Chicago, IL 60622 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify television returned years ago ☐ Yes 4.1 Cersates, LLC \$1,220.00 Last 4 digits of account number Nonpriority Creditor's Name c/o Weinstein, Pinson & Riley When was the debt incurred? 2001 Western Ave., Ste. 400 Seattle, WA 98121 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.1 Chicago Central Emerging Phys. \$235.00 3 Last 4 digits of account number Nonpriority Creditor's Name c/o United Collection Bureau When was the debt incurred? 5620 Southwyck Blvd. **Toledo, OH 43614** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

Document Page 23 of 72 Debtor 1 Deborah L. Hill Case number (if know) 4.1 City of Chicago Dept of Revenue \$22,064.60 Last 4 digits of account number Nonpriority Creditor's Name **Bankruptcy Department** When was the debt incurred? 121 N. LaSalle, Rm 107A Chicago, IL 60604 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts parking tickets ☐ Yes ■ Other Specify **DL# H40017275692** 4.1 Club Purchases \$90.04 Last 4 digits of account number Nonpriority Creditor's Name c/o RJM Acquistions When was the debt incurred? 575 Underhill Blvd., Ste. 224 Syosset, NY 11791 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.1 Com Ed \$755.57 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Legal Revenue Recovery/Claims Dept 3 Lincoln Center Oak Brook Terrace, IL 60181 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset?

■ No

☐ Yes

■ Other. Specify Utility

 \square Debts to pension or profit-sharing plans, and other similar debts

Debto	¹ Deborah L. Hill	Document Page 24 of 72 Case number (if know)	
4.1	Comcast	Last 4 digits of account number	\$83.00
7	Nonpriority Creditor's Name c/o Credit Protection Assoc. 13355 Noel Rd. Dallas, TX 75240	When was the debt incurred?	Ψ03.00
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1	Continental Finance	Last 4 digits of account number	\$131.00
	Nonpriority Creditor's Name P.O. Box 30311 Tampa, FL 33630-3311	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1	Crandon Emergency Physicians	Last 4 digits of account number	\$386.00
	Nonpriority Creditor's Name c/o NCO-MedcIr 507 Prudential Rd. Horsham, PA 19044	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	

■ No

☐ Yes

Other. Specify

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts Case 16-08421 Doc 1 Filed 03/11/16 Entered 03/11/16 11:00:40 Desc Main Page 25 of 72 Case number (if know) Document

Debtor 1 Deborah L. Hill 4.2 \$250.00 **Emergency Medical Specialists** Last 4 digits of account number 0 Nonpriority Creditor's Name c/o Creditors Discount & Audit When was the debt incurred? 415 E. MainSt. Streator, IL 61364 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.2 **EMP of Cook County, LLC** \$442.00 Last 4 digits of account number Nonpriority Creditor's Name c/o Escallate, LLC When was the debt incurred? 5200 Stoneham Rd., Ste. 200 North Canton, OH 44720 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.2 Fifth Third Bank \$989.06 Last 4 digits of account number Nonpriority Creditor's Name c/o National Account Services When was the debt incurred? 1246 University Ave., Ste. 421 Saint Paul, MN 55104 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes

Other. Specify

Page 26 of 72 Case number (if know) Document Debtor 1 Deborah L. Hill 4.2 First Bank of Delaware \$726.00 Last 4 digits of account number 3 Nonpriority Creditor's Name 50 S. 16th St. When was the debt incurred? Ste. 2300 Philadelphia, PA 19102 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.2 **Hill Tax Services** 2713 \$15.00 Last 4 digits of account number Nonpriority Creditor's Name c/o TeleCheck Services When was the debt incurred? P.O. Box 60028 City of Industry, CA 91716-0028 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.2 Homecomings Financial/LVNV \$555.20 Last 4 digits of account number 5 Nonpriority Creditor's Name c/o Resurgent Capital Services When was the debt incurred? P.O. Box 10587 Greenville, SC 29603-0587 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

report as priority claims

Other. Specify

☐ Debts to pension or profit-sharing plans, and other similar debts

Page 27 of 72 Case number (if know) Document Debtor 1 Deborah L. Hill 4.2 \$2,908.00 **Kahuna Payment Solutions** Last 4 digits of account number 6 Nonpriority Creditor's Name c/o Charles G. McCarthy & Assoc. When was the debt incurred? P.O. Box 1045 Bloomington, IL 61702-1045 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.2 **Mercy Family Health Center** \$124.00 Last 4 digits of account number Nonpriority Creditor's Name 35072 Eagle Way When was the debt incurred? Chicago, IL 60678-1350 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.2 Mercy Physician Billing \$123.00 8 Last 4 digits of account number Nonpriority Creditor's Name c/o Harris & Harris When was the debt incurred? 111 W. Jackson, Ste. 400 Chicago, IL 60604 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No
□ Yes

Other. Specify

 \square Debts to pension or profit-sharing plans, and other similar debts

Document Page 28 of 72 Debtor 1 Deborah L. Hill Case number (if know) 4.2 Monroe & Main \$352.30 Last 4 digits of account number 9 Nonpriority Creditor's Name c/o Creditors Bankruptcy Service When was the debt incurred? P.O. Box 740933 Dallas, TX 75374 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.3 **National Quik Cash** \$505.00 Last 4 digits of account number 0 Nonpriority Creditor's Name 8202 S. Stony Island Ave. When was the debt incurred? Chicago, IL 60617 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.3 Navient Solutions, Inc. \$16,957.36 Last 4 digits of account number Nonpriority Creditor's Name **Department of Education Loan** When was the debt incurred? Servic P.O. Box 9635 Wilkes Barre, PA 18773-9635 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

☐ Other. Specify

 \square Debts to pension or profit-sharing plans, and other similar debts

student loan

Document Page 29 of 72 Debtor 1 Deborah L. Hill Case number (if know) 4.3 Pathology Associates of Chicago \$216.00 Last 4 digits of account number 2 Nonpriority Creditor's Name c/o Dependon Collection When was the debt incurred? P.O. Box 4833 Oak Brook, IL 60522 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.3 Peoples Gas* \$549.93 Last 4 digits of account number 3 Nonpriority Creditor's Name Attn: Bankruptcy/Legal Department When was the debt incurred? 200 E. Randolph Street, Floor 20 Chicago, IL 60601 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Utility ☐ Yes 4.3 Premier Bankcard/Charter \$500.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 2208 Vacaville, CA 95696 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another

debt

■ No

☐ Yes

☐ Student loans

report as priority claims

 \square Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Credit card purchases

☐ Check if this claim is for a community

Page 30 of 72 Case number (if know) Document Debtor 1 Deborah L. Hill 4.3 \$480.00 **Quantum 3 Group LLC** Last 4 digits of account number 5 Nonpriority Creditor's Name c/o MOMA Funding LLC When was the debt incurred? P.O. Box 788 Kirkland, WA 98083-0788 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.3 Quantum 3 Group LLC \$394.94 Last 4 digits of account number 6 Nonpriority Creditor's Name c/o MOMA Funding LLC When was the debt incurred? P.O. Box 788 Kirkland, WA 98083-0788 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.3 **Quantum 3 Group LLC** \$1,500.00 Last 4 digits of account number Nonpriority Creditor's Name c/o MOMA Funding LLC When was the debt incurred? P.O. Box 788 Kirkland, WA 98083-0788 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans

debt

■ No

☐ Yes

report as priority claims

Other. Specify

 \square Obligations arising out of a separation agreement or divorce that you did not

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Check if this claim is for a community

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Entered 03/11/16 11:00:40 Desc Main Document Page 31 of 72 Debtor 1 Deborah L. Hill Case number (if know) 4.3 Quantum3 Group, LLC \$4,334.95 Last 4 digits of account number 8 Nonpriority Creditor's Name c/o Galaxy Asset Purchasing, LLC When was the debt incurred? P.O. Box 788 Kirkland, WA 98083-0788 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.3 Quantum3 Group, LLC \$1,042.23 Last 4 digits of account number 9 Nonpriority Creditor's Name **PRC Acquistions V LLC** When was the debt incurred? P.O. Box 788 Kirkland, WA 98083-0788 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.4 Reward660 Visa/Most Funding \$558.68 Last 4 digits of account number 0 Nonpriority Creditor's Name c/o Jefferson Capital Systems When was the debt incurred? P.O. Box 7999 Saint Cloud, MN 56302-9617 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

debt

■ No

☐ Yes

 \square Obligations arising out of a separation agreement or divorce that you did not

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

Other. Specify

☐ Check if this claim is for a community

Page 32 of 72 Case number (if know) Debtor 1 Deborah L. Hill 4.4 **Roseland Community Hospital** \$315.00 Last 4 digits of account number Nonpriority Creditor's Name 45 W. 111th St. When was the debt incurred? Chicago, IL 60628 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.4 Roundup Funding, LLC \$160.00 Last 4 digits of account number Nonpriority Creditor's Name MS 550 When was the debt incurred? P.O. Box 91121 Seattle, WA 98111-9221 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.4 **Soto Investment Group** \$2,042.00 3 Last 4 digits of account number Nonpriority Creditor's Name c/o National Credit System When was the debt incurred? P.O. Box 312125 Atlanta, GA 31131 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No ☐ Yes

Other. Specify

 \square Debts to pension or profit-sharing plans, and other similar debts

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Jebt	or 1 Deborah L. Hill	Case number (if know)	
1.4 1	Sprint	Last 4 digits of account number	\$1,021.56
	Nonpriority Creditor's Name c/o Cavalry SPV I, LLC 500 Summit Lake Drive, Ste. 400	When was the debt incurred?	
	Valhalla, NY 10595 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Utility	
4.4	Sprint Nextel Correspondence	Last 4 digits of account number	\$1,118.13
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. P.O. Box 7949	When was the debt incurred?	
	Overland Park, KS 66207-0949 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_	П	
	■ Debtor 1 only	□ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.4 6	T-Mobile/American Infosource Lp	Last 4 digits of account number	\$404.89
	Nonpriority Creditor's Name P.O. Box 248848 Oklahoma City, OK 73124-8848	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	■ No	<u>_</u>	
	Yes	Other. Specify	

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Debtor 1 Deborah L. Hill Case number (if know) 4.4 \$100.00 **TCF National Bank** Last 4 digits of account number Nonpriority Creditor's Name c/o American Collection Corp. When was the debt incurred? 919 Estes Court Schaumburg, IL 60193 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.4 **Tronix Cntry** \$1,227.33 Last 4 digits of account number 8 Nonpriority Creditor's Name 8001 Forbes Place When was the debt incurred? Ste. 211 Springfield, VA 22151 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.4 U.S. Cellular \$474.64 Last 4 digits of account number 9 Nonpriority Creditor's Name c/o American Inforsource When was the debt incurred? P.O. Box 248838 Oklahoma City, OK 73124-8838 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Utility

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Debtor 1 Deborah L. Hill Case number (if know) 4.5 U.S. Cellular \$1,407.24 Last 4 digits of account number 0 Nonpriority Creditor's Name c/o American Infosource, LP When was the debt incurred? P.O. Box 248838 Oklahoma City, OK 73124-8838 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Utility 4.5 Verizon \$1,581.46 Last 4 digits of account number Nonpriority Creditor's Name c/o American Infosource When was the debt incurred? P.O. Box 248838 Oklahoma City, OK 73124-8838 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Washington Mutual/Jefferson 4.5 \$388.63 2 Capital Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? c/o RJM Acquistions P.O. Box 7999 Saint Cloud, MN 56302-9617 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

Other. Specify

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Debtor	1 Deborah L. Hill	Case number (if know)	
4.5	Washington Mutual/Jefferson Capital Nonpriority Creditor's Name	Last 4 digits of account number	\$883.47
	c/o RJM Acquistions P.O. Box 7999	When was the debt incurred?	
	Saint Cloud, MN 56302-9617		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.5	Wells Fargo Bank	Last 4 digits of account number	\$324.56
	Nonpriority Creditor's Name P.O. Box 5058 MAC P6053-021	When was the debt incurred?	
	Portland, OR 97208 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	•	Debts to pension or profit-sharing plans, and other similar debts	
	No		
	☐ Yes	Other. Specify	
4.5 5	Wow Cable & Internet	Last 4 digits of account number	\$107.00
	Nonpriority Creditor's Name 4200 International Parkway Carrollton, TX 75007	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other Specify	

Other. Specify

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Page 37 of 72 Case number (if know) Document Debtor 1 Deborah L. Hill

4.5 6	Zalutsky & Pinski	Last 4 digits of account numb	er	\$4,137.00					
U	Nonpriority Creditor's Name								
	c/o Michael Pekay	When was the debt incurred?		-					
	77 W. Washington, Ste. 719 Chicago, IL 60602								
	Number Street City State Zlp Code	As of the date you file, the cla	im is: Check all that apply						
	Who incurred the debt? Check one.								
	■ Debtor 1 only	☐ Contingent	☐ Contingent						
	Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed							
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:							
	☐ Check if this claim is for a community	☐ Student loans							
	debt		Obligations arising out of a separation agreement or divorce that you did not						
	Is the claim subject to offset?	<u>-</u> ' ' '	report as priority claims						
	No	·	aring plans, and other similar debts						
	☐ Yes	Other. Specify attorney	fees	-					
Part	3: List Others to Be Notified About a De	eht That You Already Listed							
	e this page only if you have others to be notified	•	at you already listed in Parts 1 or 2. For examp	ole. if a collection agency					
is t	rying to collect from you for a debt you owe to s	someone else, list the original credito	or in Parts 1 or 2, then list the collection agency	y here. Similarly, if you					
	ve more than one creditor for any of the debts the ified for any debts in Parts 1 or 2, do not fill out		dditional creditors nere. If you do not have add	ditional persons to be					
Name	e and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?						
	T Services, Inc.	Line 4.8 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Clai	ms					
	n: Bankruptcy Dept.		■ Part 2: Creditors with Nonpriority Unsecured	Claims					
	Γ&T Way, Rm 3A104 minster, NJ 07921								
Бси	1111113131, 110 07321	Last 4 digits of account number							
Name	e and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?						
	of Chicago	Line 4.14 of (Check one):	Part 1: Creditors with Priority Unsecured Clai	ms					
	W. Superior		Part 2: Creditors with Nonpriority Unsecured						
	t Floor								
Chic	cago, IL 60654	Last 4 digits of account number							
Name	e and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?						
	of Chicago Dept. of Finance	Line 4.14 of (Check one):	Part 1: Creditors with Priority Unsecured Clai	ims					
P.O.	. Box 88292	,	Part 2: Creditors with Nonpriority Unsecured						
Chic	cago, IL 60680-1292	Last 4 digits of account number							
		Last 4 digits of account number							
	e and Address	On which entry in Part 1 or Part 2 did	=						
	of Chicago Dept. of Revenue Arnold Scott Harris PC	Line 4.14 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Clai						
	Merchandise Mart Pz, #1932		Part 2: Creditors with Nonpriority Unsecured	Claims					
	cago, IL 60654								
		Last 4 digits of account number							
	e and Address	On which entry in Part 1 or Part 2 did							
	dit Protection Association, LP 55 Noel Rd.	Line 4.8 of (Check one):	Part 1: Creditors with Priority Unsecured Clai						
	as, TX 75240		Part 2: Creditors with Nonpriority Unsecured	Claims					
	us, 17.10 2 .10	Last 4 digits of account number							
Name	e and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?						
DM\	/	Line 4.14 of (Check one):	Part 1: Creditors with Priority Unsecured Clai	ms					
	I. State St.		■ Part 2: Creditors with Nonpriority Unsecured	Claims					
	n Floor cago, IL 60602								
Jill	Jugo, IL 00002	Last 4 digits of account number							
Name	e and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?						
ECN		Line 4.31 of (Check one):	Part 1: Creditors with Priority Unsecured Clai	ms					

Official Form 106 E/F

Case 16-08421 Doc 1 Filed 03/11/16 Entered 03/11/16 11:00:40 Desc Main Page 38 of 72 Case number (if know) Document Debtor 1 Deborah L. Hill P.O. Box 64909 Part 2: Creditors with Nonpriority Unsecured Claims Saint Paul, MN 55164-0909 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Harris & Harris** Line 4.14 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 111 W. Jackson Blvd, Ste. 400 ■ Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60604 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Internal Revenue Service Line 4.31 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 7346 ■ Part 2: Creditors with Nonpriority Unsecured Claims Philadelphia, PA 19101-7346 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? ISAC^{*} Line 4.31 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 1755 Lake Cook Rd. Part 2: Creditors with Nonpriority Unsecured Claims Deerfield, IL 60015-5209 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Kahuna Payment Solutions** Line 4.26 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims c/o Charles McCarthy Part 2: Creditors with Nonpriority Unsecured Claims 705 North East St. Bloomington, IL 61701 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Linebarger, Goggan, et al Line 4.14 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 06152 ■ Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60606-0152 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Sallie Mae Line 4.31 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 9500 ■ Part 2: Creditors with Nonpriority Unsecured Claims Wilkes Barre, PA 18773-9500 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Sallie Mae/U.S. Dept. of Education Line 4.31 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 9635 ■ Part 2: Creditors with Nonpriority Unsecured Claims Wilkes Barre, PA 18773-9635 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Secretary of State** Line 4.14 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 2701 S. Dirksen Parkway Part 2: Creditors with Nonpriority Unsecured Claims Springfield, IL 62723 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Sorman & Frankel Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 180 N. LaSalle Part 2: Creditors with Nonpriority Unsecured Claims Ste. 2700 Chicago, IL 60601 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? T-Mobile Line 4.46 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 742596 Part 2: Creditors with Nonpriority Unsecured Claims Cincinnati, OH 45274 Last 4 digits of account number

Name and Address U.S. Dept. of Education P.O. Box 16448 Saint Paul, MN 55116-0448

Official Form 106 E/F

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.38 of (Check one):

Part 2: Creditors with Nonpriority Unsecured Claims

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Debtor 1 Deborah L. Hill

Last 4 digits of account number

Name and Address
U.S. Dept. of Education
Direct Loan Servicing Center
P.O. Box 5609
Greenville, TX 75403-5609

Case number (if know)

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.31 of (Check one):

Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	<u> </u>	0.00
				Ψ	
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	16,957.36
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	74,785.09
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	91,742.45

Last 4 digits of account number

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Fill in this information to identify your case:
Debtor 1 Deborah L. Hill
First Name Middle Name Last Name
Debtor 2
(Spouse if, filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS
Case number
(if known)

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the c	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3	<u> </u>		<u> </u>		
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4	0.1.5		0.0.0	2.1. 0000	
2.4	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	- ity		Cidio		

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		Docume	<u>ent Page 41 d</u>	of 72	
Fill in thi	is information to identify your	case:			
Debtor 1	Deborah L. Hill				
DCD(OI I	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, f	filing) First Name	Middle Name	Last Name		
United St	tates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
_					
Case nur (if known)	mber				☐ Check if this is an
(amended filing
					3
Officia	al Form 106H				
Sche	dule H: Your Cod	lebtors			12/15
50110	dalo III. I odi odo				12/13
people ar	re filing together, both are equ	ually responsible for supp	lying correct informa	tion. If more space is ı	rate as possible. If two married needed, copy the Additional Page, p of any Additional Pages, write
our nam	e and case number (if known). Answer every question	•		-
1. Do	o you have any codebtors? (If	you are filing a joint case,	do not list either spouse	e as a codebtor.	
■ No	0				
□ Y€					
	ithin the last 8 years, have yo ona, California, Idaho, Louisiana				
Alizo	oria, Camorria, Idario, Lodisiaria	i, Nevaua, New Mexico, Fu	erio Nico, Texas, Wasi	ington, and wisconsin.,	•
■ No	o. Go to line 3.				
□Y€	es. Did your spouse, former spo	use, or legal equivalent live	with you at the time?		
3. In Co	olumn 1 list all of your codeb	tors. Do not include your	snouse as a codebto	r if vour snouse is filin	g with you. List the person shown
in lir	ne 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	sure you have listed t	he creditor on Schedule D (Official
	n 106D), Schedule E/F (Officia Column 2.	I Form 106E/F), or Sched	ule G (Official Form 1	06G). Use Schedule D,	Schedule E/F, or Schedule G to fill
out	Column 2.				
	Column 1: Your codebtor				editor to whom you owe the debt
	Name, Number, Street, City, State and Z	IP Code		Check all schedul	es that apply:
3.1				☐ Schedule D, lir	ne.
0.1	Name			□ Schedule E/F,	
				☐ Schedule G, lir	
	Number Ctreet				
	Number Street City	State	ZIP Code		
	·				
3.2	Name			Schedule D, lir	
				☐ Schedule E/F,	
				☐ Schedule G, lir	ıe
	Number Street	Chata	710.0-4-		
	City	State	ZIP Code		

Schedule H: Your Codebtors

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C:II	in this information to identify y									
	in this information to identify you be tor 1 Deborah									
	otor 2 ouse, if filing)				_					
Uni	ted States Bankruptcy Court fo	r the: NORTHERN DISTRI	CT OF ILLINOIS							
	se number nown)		_			□ A		ed filing ent showin	g postpetition ollowing date:	
0	fficial Form 106I					M	IM / DD/ Y	/YYY		
S	chedule I: Your I	ncome								12/15
spo atta	plying correct information. If use. If you are separated and ch a separate sheet to this for the control of the	your spouse is not filing worm. On the top of any addition	ith you, do not incluing it incluing it incluing it incluing it is incluing it is incluing it is incluing it incluing it is incluing it is incluing it incluing it is incluing it incluing it is incluing it incluing it is incluing it is incluing it is incluing it incluing it is incluing it is incluing it is incluing it is incluing it incluing it incluing it is incluing it incluing it incluing it is incluing it incluing it incluing it is incluing it incluing it incluing it is incluing it incluing it is incluing it incluing it	ude infor	mati	on about	your spo imber (if	ouse. If me known). <i>A</i>	ore space is Answer every	needed,
	information.		Debtor 1				□ Emple		ling spouse	
	If you have more than one jo attach a separate page with information about additional	Employment status	■ Employed□ Not employed	_				mployed		
	employers.	Occupation	Security							
	Include part-time, seasonal, of self-employed work.	Employer's name	Jones Security	,						
	Occupation may include stud or homemaker, if it applies.	ent Employer's address	7841 South Exc Chicago, IL	change						
		How long employed t	there? 4 mon	ths			_			
Par	Give Details About	Monthly Income								
	mate monthly income as of t use unless you are separated.	he date you file this form. If	you have nothing to	report for	any	line, write	\$0 in the	space. In	clude your no	n-filing
	u or your non-filing spouse have space, attach a separate she		ombine the information	on for all	empl	oyers for	that perso	on on the li	nes below. If	you need
						For Dek	otor 1		btor 2 or ing spouse	
2.		salary, and commissions (bithly, calculate what the month		2.	\$	1	,733.33	\$	N/A	
3.	Estimate and list monthly of	overtime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. A	dd line 2 + line 3.		4.	\$	1,73	33.33	\$	N/A	

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Deb	tor 1	Deborah L. Hill	_	Case n	umber (if known)	-			
				For D	Debtor 1	non-f	ebtor 2 or iling spouse		
	Cop	y line 4 here	4.	\$	1,733.33	\$	N/A	_	
5.	List	all payroll deductions:							
	5a. 5b. 5c. 5d. 5e. 5f.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues	5a. 5b. 5c. 5d. 5e. 5f. 5g.	\$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$	N/A N/A N/A N/A N/A N/A	- - - -	
	5h.	Other deductions. Specify:	5h.+	- :		+ \$	N/A	_	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	 6.	\$	0.00	\$	N/A	_	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,733.33	\$	N/A	-	
8.		all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8c. 8d. 8e.	\$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$	N/A N/A N/A N/A	- - - -	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A	_	
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	N/A		
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	A	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	1	,733.33 + \$		N/A = \$ _	1,733.33	
11.	1. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00								
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies					12. \$	1,733.33	
13.	Do y	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	?				Combii monthl	nea ly income	

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	in this informa	tion to identify yo	our case:			1				
Deb		Deborah L. H				Chi	eck if this is:			
		Deboran L. I				☐ An amended filing				
	tor 2 buse, if filing)							wing postpetition chapter f the following date:		
Unite	ed States Bankr	uptcy Court for the	: NORTH	HERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY			
	e numbe r nown)									
Of	fficial Fo	rm 106J				-				
		J: Your I	Exper	nses				12/1		
Be a	as complete a	and accurate as	possible.	. If two married people ar ich another sheet to this	e filing together, b form. On the top o	oth are eq f any addit	ually responsible fi ional pages, write	or supplying correct your name and case		
Part	t 1: Descr	ibe Your House	hold							
١.	No. Go to									
			in a separ	ate household?						
	□N									
	□ Y	es. Debtor 2 mus	st file Offici	al Form 106J-2, Expenses	s for Separate House	ehold of De	btor 2.			
2.	Do you have	e dependents?	■ No							
	Do not list Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?		
	Do not state							□ No		
	dependents	names.						_ □ Yes □ No		
								☐ Yes		
							_	□No		
								_		
								□ No		
3.	Do your eyr	enses include	_					Yes		
J.	expenses of	f people other the d your depende	han $_{m \Box}$	No Yes						
exp	imate your ex		our bankrı	uptcy filing date unless y				napter 13 case to report of the form and fill in the		
the		n assistance and		government assistance i cluded it on <i>Schedule I:</i> Y			Your exp	penses		
4.		or home owners		ses for your residence. I	nclude first mortgag	e 4.	\$	380.00		
	If not includ	led in line 4:								
	4a. Real e	estate taxes				4a.	\$	0.00		
		rty, homeowner's	s, or renter	's insurance		4b.	·	0.00		
				upkeep expenses		4c.	·	0.00		
F		owner's associat			ma aguite la	4d.		0.00		
5.	Auditional r	nortgage payme	ents for yo	our residence, such as ho	me equity loans	5.	Φ	0.00		

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Debtor 1 Deborah L	. Hill	Case num	nber (if known)	
6. Utilities:				
	eat, natural gas	6a.	\$	0.00
•	r, garbage collection	6b.		0.00
	cell phone, Internet, satellite, and cable services	6c.	·	64.00
6d. Other. Speci		6d.	·	0.00
. Food and housek	•	7.	·	375.00
	Idren's education costs	8.	·	0.00
Clothing, laundry,		9.	·	115.00
). Personal care pro		9. 10.	· -	
•			·	95.00
	•	11.	\$	60.00
Do not include car	clude gas, maintenance, bus or train fare.	12.	\$	290.00
	ubs, recreation, newspapers, magazines, and books	13.	· <u> </u>	48.33
	putions and religious donations	14.		0.00
5. Insurance.	duons and rengious donations	14.	Ψ	0.00
	rance deducted from your pay or included in lines 4 or 20.			
15a. Life insurance		15a.	\$	0.00
15b. Health insura		15b.	· -	0.00
15c. Vehicle insur		15c.	· -	61.00
15d. Other insura		15d.		0.00
	ude taxes deducted from your pay or included in lines 4 or 20		Ψ	0.00
Specify:	ade taxes deducted from your pay or included in lines 4 or 20	16.	\$	0.00
7. Installment or leas	se navments:			0.00
17a. Car payment		17a.	\$	0.00
17b. Car payment		17b.	\$	0.00
17c. Other. Speci		17c.	· -	0.00
17d. Other. Speci		17d.	·	0.00
•	ialimony, maintenance, and support that you did not rep		Ψ	0.00
	ur pay on line 5, Schedule I, Your Income (Official Form		\$	0.00
	ou make to support others who do not live with you.	,	\$	0.00
Specify:		19.		
). Other real propert	ty expenses not included in lines 4 or 5 of this form or or	n Schedule I: Yo	our Income.	
20a. Mortgages o	n other property	20a.	\$	0.00
20b. Real estate t	axes	20b.	\$	0.00
20c. Property, hor	meowner's, or renter's insurance	20c.	\$	0.00
20d. Maintenance	e, repair, and upkeep expenses	20d.	\$	0.00
	s association or condominium dues	20e.	\$	0.00
1. Other: Specify:	work lunches	21.	+\$	50.00
_				30.00
Calculate your mo				
22a. Add lines 4 th	9		\$	1,538.33
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 10)6J-2	\$	
22c. Add line 22a a	and 22b. The result is your monthly expenses.		\$	1,538.33
				<u> </u>
3. Calculate your mo	•	00	Φ.	4 700 00
	(your combined monthly income) from Schedule I.	23a.		1,733.33
23b. Copy your m	nonthly expenses from line 22c above.	23b.	-\$	1,538.33
000 0	monthly over an accompany of the monthly in a company			
	r monthly expenses from your monthly income. your monthly net income.	23c.	\$	195.00
The result is	your monuny neumoonie.	200.	*	
4. Do you expect an	increase or decrease in your expenses within the year a	after you file this	s form?	
For example, do you	expect to finish paying for your car loan within the year or do you expe			e or decrease because c
	ms of your mortgage?	· -		
■ No.				
☐ Yes. E	Explain here:			

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Fill in this inform	nation to identify your	case:							
Debtor 1	Deborah L. Hill								
	First Name	Middle Name	Last Name						
Debtor 2									
(Spouse if, filing)	First Name	Middle Name	Last Name						
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS						
Case number									
(if known)				☐ Check if this is an amended filing					
Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/15									
If two married pe	ople are filing togethe	r, both are equally respo	nsible for supplying correct inf	formation.					
obtaining money		n connection with a ban		ng a false statement, concealing property, or up to \$250,000, or imprisonment for up to 20					
Sign	n Below								
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?									
■ No									
☐ Yes. Name of person Attach Bankruptcy Petition Prepar Declaration, and Signature (Official									

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and

Signature of Debtor 2

Date

that they are true and correct.

Date March 11, 2016

X /s/ Deborah L. Hill

Deborah L. Hill Signature of Debtor 1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before								
Debtor 2 (Spouse & Bindle) First Name	Fill	l in this inform		r case:				
Debtor 2 Check if this is an amended filing First Name Modile Name Last Name	De	btor 1		Middle Name	Last N	ame		
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filling Offficial Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 15: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 Rived there Details Syears, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Port 2 Explain the Sources of Your Income 1. Did you have any income from employment or from operating a businesse, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Checke lit that apply. Checke (all that apply). Gross income (Checke all that apply). Checke (all that apply	De	btor 2	, not reame	madio Namo	20011	u		
Case number Check if this is an amended filing Check if this is an amended filing	(Sp	ouse if, filing)	First Name	Middle Name	Last N	ame		
Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 12/13 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct formation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known), Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married No what is your current marital status? Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 lived there 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the lotal amount of Income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) Debtor 2 Sources of income (before deductions and exclusions) Bornusses, lips Debtor 2 Sources of income (before deductions and exclusions) Debtor 2 Sources of income (before deductions and exclusions)	Un	ited States Bar	kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS			
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Part 1: Give Details About Your Marital Status and Where You Lived Before What is your current marital status? Married Not married Not married Not married No married Not								
What is your current marital status? Married Not married					this form. O	n the top of any	y additional pages, write yo	ur name and case
What is your current marital status? Married Not married	Pa	rt 1 Give D	, etails About Your Ma	urital Status and Where You	u Lived Refo	ro		
Married Not married	4				u Liveu Beio			
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lived there		_	all of the places you I	ived in the last 3 years. Do n	not include wh	ere you live now	<i>1</i> .	
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4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips \$3,000.00 Wages, commissions, bonuses, tips	Do.	rt 2 Evalois	the Sources of You	r Incomo				
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Tyes. Fill in the details. Debtor 1 Sources of income Check all that apply. From January 1 of current year until the date you filed for bankruptcy: Debtor 2 Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) \$3,000.00 Wages, commissions, bonuses, tips \$3,000.00 Wages, commissions, bonuses, tips		□ No						
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Check all that apply. Check all that apply. (before deductions and exclusions) Check all that apply. Check all that apply. (before deductions and exclusions) The date you filed for bankruptcy: Sample of the deductions and exclusions and exclusions. Sample of the deductions and exclusions. Sample of the deductions and exclusions. Sample of the deductions and exclusions. Check all that apply. Check all that apply. Sample of the deductions and exclusions. Sample of the deductions and exclusions. Check all that apply. Sample of the deductions and exclusions. Sample of the deductions and exclusions. Sample of the deductions and exclusions. Check all that apply. Sample of the deductions and exclusions.					Gross in	come		Gross income
the date you filed for bankruptcy: wages, commissions, bonuses, tips wages, commissions, bonuses, tips					(before de	eductions and		(before deductions
☐ Operating a business ☐ Operating a business				•		\$3,000.00	_	
				☐ Operating a business			☐ Operating a business	

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Case number (if known) Debtor 1 Deborah L. Hill

				Dobtov 1					Johton 2			
				Debtor 1	- f !	0	- !		Debtor 2		O	
					of income that apply.	(befo	ss income are deductions are asions)		Sources of inc Check all that a		Gross income (before deductions and exclusions)	
	For last calendar year: (January 1 to December 31, 2015)				Wages, commissions, \$17,203.00 nuses, tips				☐ Wages, com onuses, tips	missions,		
				☐ Opera	ting a business			[☐ Operating a	business		
		dar year be December		■ Wages bonuses,	s, commissions, tips		\$23,501.	_	☐ Wages, commissions, bonuses, tips			
				☐ Opera	ting a business			[☐ Operating a	business		
5.	Include include and other winnings. List each and the second sec	come regard public bene If you are fil	fless of wheth fit payments; ing a joint cas the gross inco	ner that inco pensions; re se and you h		amples or rest; divi	of other income a dends; money co ived together, lis	are alimo collected st it only	from lawsuits; once under De	royalties; and ebtor 1.	ecurity, unemployment, d gambling and lottery	
				Debtor 1					Debtor 2			
					of income pelow	(befo	ss income are deductions ar asions)	S	Sources of inc Describe below		Gross income (before deductions and exclusions)	
Pa	rt 3: Lis	Certain Pa	yments You	Made Befo	re You Filed for	Bankruj	ptcy					
		514 41	5.1.									
6.	□ No.	Neither D	ebtor 1 nor D	ebtor 2 ha	marily consume s primarily consu amily, or househo	umer de	bts. Consumer	<i>debt</i> s ar	e defined in 11	U.S.C. § 10	1(8) as "incurred by an	
		During the	90 days befo	•	for bankruptcy, d	id you pa	ay any creditor a	total of	\$6,225* or mo	re?		
		☐ Yes	paid that cr	editor. Do n	ot include paymei	nts for do	omestic support				ne total amount you nd alimony. Also, do	
		* Subject			o an attorney for t and every 3 year			d on or a	after the date o	of adjustment		
	Yes.				e primarily consumor for bankruptcy, d			total of	\$600 or more?	,		
		■ No.	Go to line 7									
		□ Yes	List below e	each credito							creditor. Do not nclude payments to an	
	Creditor	s Name an	d Address		Dates of payme	ent	Total amoun		Amount you still owe	Was this p	payment for	
7.	Insiders in of which y	clude your i	elatives; any ficer, director	general par , person in (any gen of 20% o	eral partners; pa or more of their v	artnershi oting se	ips of which yo curities; and a	u are a gene ny managing	ral partner; corporations agent, including one for	
	■ No	1:		alala c								
			nents to an in	sider	Data	4	T-(!			D - (. 4. 1	
	Insider's	Name and	Address		Dates of payme	ent	Total amoun		Amount you still owe	Reason fo	r this payment	

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Debtor 1	Deborah L. Hill		Case number (if known)	

8.	Within 1 year before you filed for bankrupte insider?		ments or transfer a	any property on a	ccount of a de	ebt that benefited ar
	Include payments on debts guaranteed or cos No	igned by an insider.				
	Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment tor's name
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupte List all such matters, including personal injury modifications, and contract disputes.					
	■ No □ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the	e case
10.	Within 1 year before you filed for bankrupte. Check all that apply and fill in the details below No Yes. Fill in the information below.		erty repossessed, f	foreclosed, garnis	shed, attached	, seized, or levied?
	Creditor Name and Address	Describe the Property D		Date		Value of the
		Explain what happened	d			property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec No Yes. Fill in the details. Creditor Name and Address		·	Date	action was	mounts from your Amount
12.	Within 1 year before you filed for bankrupte court-appointed receiver, a custodian, or a No Yes		erty in the possess	taker		fit of creditors, a
Par	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	tcy, did you give any gift	s with a total value	of more than \$60	0 per person?	
	Gifts with a total value of more than \$600 per person	Describe the gifts		Date: the g	s you gave ifts	Value
	Person to Whom You Gave the Gift and Address:					
14.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift or con		s or contributions	with a total value	of more than	\$600 to any charity
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		u contributed		s you ributed	Value
Par	t 6: List Certain Losses					
-						

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

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Debtor 1 Deborah L. Hill

	or gambling?						
	how the less convered		be any insurance o	•		Date of your	Value of property
			the amount that ins ce claims on line 33				
Par	t 7: List Certain Payments or Transfers						
16.	Within 1 year before you filed for bankrup consulted about seeking bankruptcy or p Include any attorneys, bankruptcy petition pr	reparir	ng a bankruptcy pe	tition?			erty to anyone you
	■ No □ Yes. Fill in the details.						
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	ou	Description and transferred	value of any prop	erty	Date payment or transfer was made	Amount of payment
17.	Within 1 year before you filed for bankrup promised to help you deal with your cred Do not include any payment or transfer that No	itors o	to make payment			or transfer any propo	erty to anyone who
	Yes. Fill in the details.		Description and		- mt	Data manusant	A manual of
	Person Who Was Paid Address		transferred	value of any prop	erty	Date payment or transfer was made	Amount of payment
18.	 Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do n include gifts and transfers that you have already listed on this statement. 						
	Yes. Fill in the details.						
	Person Who Received Transfer Address		Description and property transfer			any property or received or debts change	Date transfer was made
	Person's relationship to you						
19.	Within 10 years before you filed for banks beneficiary? (These are often called asset, No Yes. Fill in the details.			ny property to a s	elf-settled tru	ust or similar device	of which you are a
	Name of trust		Description and	value of the prope	erty transferr	ed	Date Transfer was made
Par	t 8: List of Certain Financial Accounts,	Instrun	nents, Safe Deposi	t Boxes, and Sto	rage Units		
20.	Within 1 year before you filed for bankrup sold, moved, or transferred? Include checking, savings, money market houses, pension funds, cooperatives, ass No	t, or oth	ner financial accou	nts; certificates o	of deposit; sh		
	Yes. Fill in the details.			_			
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)		st 4 digits of count number	Type of accour instrument	clo	te account was osed, sold, oved, or	Last balance before closing or transfer

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Debtor 1 Deborah L. Hill

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for secucash, or other valuables?								
	■ No							
	Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?				
22.	Have you stored property in a storage unit or pl	ace other than your home within 1	year before you filed for bankruptcy					
	No							
	Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?				
Par	t 9: Identify Property You Hold or Control for	Someone Else						
23.	Do you hold or control any property that someofor someone.	one else owns? Include any proper	ty you borrowed from, are storing for,	or hold in trust				
	■ No							
	☐ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value				
Par	t 10: Give Details About Environmental Informa	ation						
For	the purpose of Part 10, the following definitions	apply:						
•	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these substances are leastly for the substances.	ir, land, soil, surface water, ground ostances, wastes, or material.	dwater, or other medium, including star	tutes or				
_	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		aw, wnetner you now own, operate, or	utilize it or used				
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or s		waste, hazardous substance, toxic su	ıbstance,				
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of when	they occurred.					
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	under or in violation of an environmer	ntal law?				
	■ No							
	☐ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any	release of hazardous material?						
	■ No							
	Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
		,						

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26.	Have you	have you been a party in any judicial or administrative proceeding under any environmental law? include settlements and orders.							
	■ No								
	☐ Yes. F	ill in the details.							
	Case Title Case Nun		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the	case	Status of the case			
Par	t 11: Give	Details About Your Business or	Connections to Any Business						
27.	Within 4 ye	ears before you filed for bankrup	cy, did you own a business or have an	y of the follow	ing connections to any	business?			
	□ A s	sole proprietor or self-employed i	n a trade, profession, or other activity,	either full-time	or part-time				
	□ A r	nember of a limited liability comp	pany (LLC) or limited liability partnersh	ip (LLP)					
	ПА	partner in a partnership							
	☐ An	officer, director, or managing ex	ecutive of a corporation						
	□ An	owner of at least 5% of the votin	g or equity securities of a corporation						
		one of the above applies. Go to I							
	_	Yes. Check all that apply above and fill in the details below for each business.							
	Business		Describe the nature of the business		Employer Identification number				
	Address	pet City State and ZIP Code)	Name of appropriate or healthcomes	Do not include Social Security number or ITII					
	(Number, Street, City, State and ZIP Code)		Name of accountant or bookkeeper	Dates bu	Dates business existed				
	Hill's Tax		Tax Preparer	EIN:	1426				
		ıth King Drive IL 60616		From-To	2011-present				
28.		ears before you filed for bankrupt s, creditors, or other parties.	ccy, did you give a financial statement t	to anyone abou	ut your business? Inclu	de all financial			
	■ No □ Yes. F	ill in the details below.							
	Name Address (Number, Str	eet, City, State and ZIP Code)	Date Issued						

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Case number (if known) Document

Debtor 1 Deborah L. Hill

Part 12: Sign Below		
are true and correct. I understand that ma	at of Financial Affairs and any attachments, and I decla aking a false statement, concealing property, or obtain s up to \$250,000, or imprisonment for up to 20 years, o	ning money or property by fraud in connection
/s/ Deborah L. Hill		
Deborah L. Hill	Signature of Debtor 2	
Signature of Debtor 1		
Date March 11, 2016	Date	
Did you attach additional pages to Your S	Statement of Financial Affairs for Individuals Filing for	Bankruptcy (Official Form 107)?
■ No		
□ Yes		
Did you pay or agree to pay someone wh	o is not an attorney to help you fill out bankruptcy for	ms?
■ No		
☐ Yes. Name of Person Attach the	Bankruptcy Petition Preparer's Notice, Declaration, and S	Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/2015)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.

- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other

attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.

- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section

726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.

□The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$310.00
- 3. Before signing this agreement, the attorney has received, \$0.00 toward the flat fee, leaving a balance due of \$4,000.00; and \$0.00 for expenses, leaving a balance due for the filing fee of \$0.00
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: 03/11/2016

Deborah I. Hill

Signed:

Rae Kaplan

Attorney for the Debtor(s)

Debtor(s)

Do not sign this agreement if the amounts are blank.

Local Bankruptcy Form 23c

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B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	e Deborah L. Hill		Case No.	
		Debtor(s)	Chapter	13
	DISCLOSURE OF COMPENS	SATION OF ATTORN	NEY FOR DE	EBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), compensation paid to me within one year before the filing of be rendered on behalf of the debtor(s) in contemplation of o	of the petition in bankruptcy, or	agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	4,000.00
	Prior to the filing of this statement I have received			0.00
	Balance Due		\$	4,000.00
2.	\$310.00 of the filing fee has been paid.			
3.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5.	■ I have not agreed to share the above-disclosed compens	sation with any other person un	less they are meml	bers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names			
6.	In return for the above-disclosed fee, I have agreed to rende	er legal service for all aspects o	f the bankruptcy c	ease, including:
	a. Analysis of the debtor's financial situation, and renderingb. Preparation and filing of any petition, schedules, statemeter.c. Representation of the debtor at the meeting of creditors and [Other provisions as needed]	ent of affairs and plan which m	ay be required;	
7.	By agreement with the debtor(s), the above-disclosed fee do	oes not include the following se	ervice:	
		CERTIFICATION		
	I certify that the foregoing is a complete statement of any agbankruptcy proceeding.	greement or arrangement for pa	lyment to me for re	epresentation of the debtor(s) in
	March 11, 2016	/s/ Rae Kaplan		
_	Date	Rae Kaplan		
		Signature of Attorney Kaplan Bankruptcy	Firm. LLC	
		25 East Washingtor		
		Suite 1501 Chicago, IL 60602		
		(312) 294-8989 Fax		5
		rkaplan@financialre	elief.com	
		Name of law firm		

United States Bankruptcy Court Northern District of Illinois

In re	Deborah L. Hill		_ Case No.	
	VER	Debtor(s) IFICATION OF CREDITOR MA	Chapter ATRIX	13
		Number of C	Creditors:	75
	The above-named Debtor(s) he (our) knowledge.	ereby verifies that the list of credito	rs is true and	correct to the best of my
Date:	March 11, 2016	/s/ Deborah L. Hill Deborah L. Hill Signature of Debtor		

America's Financial Choice 1415 W. 22nd St Tower Floor Oak Brook, IL 60523

Americredit P.O. Box 183853 Arlington, TX 76096

Aspire Card/Midland Credit Mgmt. c/o Jefferson Capital Systems P.O. Box 7999 Saint Cloud, MN 56302-9617

Aspire Card/Midland Credit Mgmt. c/o Jefferson Capital Systems P.O. Box 7999 Saint Cloud, MN 56302-9617

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Aspire Card/Midland Credit Mgmt. c/o Jefferson Capital Systems P.O. Box 7999 Saint Cloud, MN 56302-9617

AT&T Broadband c/o Credit Protection Assoc. P.O. Box 802068 Dallas, TX 75380

AT&T Services, Inc. Attn: Bankruptcy Dept. 1 AT&T Way, Rm 3A104 Bedminster, NJ 07921 Bally's c/o Professional Recovery System 600 17th St. Denver, CO 80202

Bank of America c/o FBCS 2200 Byberry Rd., Ste. 120 Hatboro, PA 19040

Central Furniture Mart 1348 N. Milwaukee Chicago, IL 60622

Cersates, LLC c/o Weinstein, Pinson & Riley 2001 Western Ave., Ste. 400 Seattle, WA 98121

Chicago Central Emerging Phys. c/o United Collection Bureau 5620 Southwyck Blvd. Toledo, OH 43614

City of Chicago 400 W. Superior First Floor Chicago, IL 60654

City of Chicago Dept of Revenue Bankruptcy Department 121 N. LaSalle, Rm 107A Chicago, IL 60604

City of Chicago Dept. of Finance P.O. Box 88292 Chicago, IL 60680-1292

City of Chicago Dept. of Revenue c/o Arnold Scott Harris PC 222 Merchandise Mart Pz, #1932 Chicago, IL 60654 Club Purchases c/o RJM Acquistions 575 Underhill Blvd., Ste. 224 Syosset, NY 11791

Com Ed
Legal Revenue Recovery/Claims Dept
3 Lincoln Center
Oak Brook Terrace, IL 60181

Comcast c/o Credit Protection Assoc. 13355 Noel Rd. Dallas, TX 75240

Continental Finance P.O. Box 30311 Tampa, FL 33630-3311

Crandon Emergency Physicians c/o NCO-Medclr 507 Prudential Rd. Horsham, PA 19044

Credit Protection Association, LP 13355 Noel Rd. Dallas, TX 75240

DMV 17 N. State St. 10th Floor Chicago, IL 60602

ECMC P.O. Box 64909 Saint Paul, MN 55164-0909

Emergency Medical Specialists c/o Creditors Discount & Audit 415 E. MainSt. Streator, IL 61364

EMP of Cook County, LLC c/o Escallate, LLC 5200 Stoneham Rd., Ste. 200 North Canton, OH 44720

Fifth Third Bank c/o National Account Services 1246 University Ave., Ste. 421 Saint Paul, MN 55104

First Bank of Delaware 50 S. 16th St. Ste. 2300 Philadelphia, PA 19102

Harris & Harris 111 W. Jackson Blvd, Ste. 400 Chicago, IL 60604

Hill Tax Services c/o TeleCheck Services P.O. Box 60028 City of Industry, CA 91716-0028

Homecomings Financial/LVNV c/o Resurgent Capital Services P.O. Box 10587 Greenville, SC 29603-0587

Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346

ISAC*
1755 Lake Cook Rd.
Deerfield, IL 60015-5209

Kahuna Payment Solutions c/o Charles G. McCarthy & Assoc. P.O. Box 1045 Bloomington, IL 61702-1045

Kahuna Payment Solutions c/o Charles McCarthy 705 North East St. Bloomington, IL 61701

Linebarger, Goggan, et al P.O. Box 06152 Chicago, IL 60606-0152 Mercy Family Health Center 35072 Eagle Way Chicago, IL 60678-1350

Mercy Physician Billing c/o Harris & Harris 111 W. Jackson, Ste. 400 Chicago, IL 60604

Monroe & Main c/o Creditors Bankruptcy Service P.O. Box 740933 Dallas, TX 75374

National Quik Cash 8202 S. Stony Island Ave. Chicago, IL 60617

Navient Solutions, Inc. Department of Education Loan Servic P.O. Box 9635 Wilkes Barre, PA 18773-9635

Pathology Associates of Chicago c/o Dependon Collection P.O. Box 4833 Oak Brook, IL 60522

Peoples Gas*
Attn: Bankruptcy/Legal Department 200 E. Randolph Street, Floor 20 Chicago, IL 60601

Premier Bankcard/Charter P.O. Box 2208 Vacaville, CA 95696

Quantum 3 Group LLC c/o MOMA Funding LLC P.O. Box 788 Kirkland, WA 98083-0788

Quantum 3 Group LLC c/o MOMA Funding LLC P.O. Box 788 Kirkland, WA 98083-0788 Quantum 3 Group LLC c/o MOMA Funding LLC P.O. Box 788 Kirkland, WA 98083-0788

Quantum3 Group, LLC c/o Galaxy Asset Purchasing, LLC P.O. Box 788 Kirkland, WA 98083-0788

Quantum3 Group, LLC PRC Acquistions V LLC P.O. Box 788 Kirkland, WA 98083-0788

Reward660 Visa/Most Funding c/o Jefferson Capital Systems P.O. Box 7999 Saint Cloud, MN 56302-9617

Roseland Community Hospital 45 W. 111th St. Chicago, IL 60628

Roundup Funding, LLC MS 550 P.O. Box 91121 Seattle, WA 98111-9221

Sallie Mae P.O. Box 9500 Wilkes Barre, PA 18773-9500

Sallie Mae/U.S. Dept. of Education P.O. Box 9635 Wilkes Barre, PA 18773-9635

Secretary of State 2701 S. Dirksen Parkway Springfield, IL 62723

Sorman & Frankel 180 N. LaSalle Ste. 2700 Chicago, IL 60601 Soto Investment Group c/o National Credit System P.O. Box 312125 Atlanta, GA 31131

Sprint c/o Cavalry SPV I, LLC 500 Summit Lake Drive, Ste. 400 Valhalla, NY 10595

Sprint Nextel Correspondence Attn: Bankruptcy Dept. P.O. Box 7949 Overland Park, KS 66207-0949

T-Mobile P.O. Box 742596 Cincinnati, OH 45274

T-Mobile/American Infosource Lp P.O. Box 248848 Oklahoma City, OK 73124-8848

TCF National Bank c/o American Collection Corp. 919 Estes Court Schaumburg, IL 60193

Tronix Cntry 8001 Forbes Place Ste. 211 Springfield, VA 22151

U.S. Cellular c/o American Inforsource P.O. Box 248838 Oklahoma City, OK 73124-8838

U.S. Cellular c/o American Infosource, LP P.O. Box 248838 Oklahoma City, OK 73124-8838

U.S. Dept. of Education P.O. Box 16448 Saint Paul, MN 55116-0448 U.S. Dept. of Education Direct Loan Servicing Center P.O. Box 5609 Greenville, TX 75403-5609

Verizon c/o American Infosource P.O. Box 248838 Oklahoma City, OK 73124-8838

Washington Mutual/Jefferson Capital c/o RJM Acquistions P.O. Box 7999 Saint Cloud, MN 56302-9617

Washington Mutual/Jefferson Capital c/o RJM Acquistions P.O. Box 7999 Saint Cloud, MN 56302-9617

Wells Fargo Bank P.O. Box 5058 MAC P6053-021 Portland, OR 97208

Wow Cable & Internet 4200 International Parkway Carrollton, TX 75007

Zalutsky & Pinski c/o Michael Pekay 77 W. Washington, Ste. 719 Chicago, IL 60602